



Return completed form to:  
MDHE c/o ASA

P.O. Box 55757, Boston, MA 02205, Fax: (617) 521-6215, Email: mdheadjustments@amsa.com

LOAN STATUS  
UPDATE FORM (05/04)

SECTION I: BORROWER/STUDENT DEMOGRAPHIC DATA CHANGE – ITEM 2 REQUIRED

1. Borrower last name	First name	MI	2. Borrower SSN (required)
			3. Borrower SSN change
4. Student last name (PLUS only)	First name	MI	5. Student SSN change (PLUS only)
6. Address ( <input type="checkbox"/> Mailing <input type="checkbox"/> Permanent <input type="checkbox"/> Employer)	City	State	Zip Code
7. Phone # ( <input type="checkbox"/> Residence <input type="checkbox"/> Employer)	8. E-mail		

SECTION II: STUDENT ENROLLMENT DATA CHANGE– ITEM 9 REQUIRED. ITEM 13 REQUIRED FOR LENDER/SERVICER REPORT

9. Student SSN	10. <input type="checkbox"/> Full Time <input type="checkbox"/> Half-Time <input type="checkbox"/> Less than Half-time		
<input type="checkbox"/> Withdrawn <input type="checkbox"/> Never Attended	<input type="checkbox"/> Graduated <input type="checkbox"/> Leave of Absence <input type="checkbox"/> Deceased		
11. Enrollment Status Effective Date	12. Anticipated Graduation Date		
13. Enrollment Certification (required for lender/servicer enrollment status report)	School Certification Date	School Name (required) & OE Code (optional)	

Loan types for Sections III, IV, and V below: Sub (subsidized Stafford), Unsub (unsubsidized Stafford), PLUS, SLS, Con (Consolidation)

SECTION III: DISBURSEMENT DATA CHANGE – UNIQUE LOAN ID OR GUARANTEE DATE/LOAN TYPE/SSN REQUIRED

15. Unique Loan ID	16. Guarantee Date/Loan Type/SSN	17. Action*	18. Original Disb Date & Number (e.g. 1, 2, etc.)	19. New or Revised Disb Date	20. Current Gross Disb Amt.	21. New or Revised Gross Disb Amt.	22. Cancel or Refund Amt.

\*17. Action: Cancel (full or partial cancellation before or after disbursement); Reinstatement (previously cancelled/not disbursed); Reissue (disbursed); Refund (withdrawal; complete Section II), Increase, Decrease (reallocation), Add Disb

SECTION IV: LOAN PERIOD CHANGE – UNIQUE LOAN ID OR GUARANTEE DATE/LOAN TYPE/SSN REQUIRED

23. Unique Loan ID	24. Guarantee Date/Loan Type/SSN	25. Current Loan Period Begin Date	26. Revised Loan Period Begin Date	27. Current Loan Period End Date	28. Revised Loan Period End Date

SECTION V: LOAN DATA FOR LENDER/SERVICER USE ONLY – UNIQUE LOAN ID OR GUARANTEE DATE/LOAN TYPE/SSN REQUIRED

29. Repayment begin	Unique Loan ID	Guarantee Date/Loan Type/SSN	Begin Date	First Due Date	Term (months)
30. Deferment	Unique Loan ID	Guarantee Date/Loan Type/SSN	Begin Date	End Date	
31. Forbearance	Unique Loan ID	Guarantee Date/Loan Type/SSN	Begin Date	End Date	
32. Uninsured/Cured	Unique Loan ID	Guarantee Date/Loan Type/SSN	Uninsured Date	Uninsured Type*	Cure Date
33. Paid in Full	Unique Loan ID	Guarantee Date/Loan Type/SSN	PIF Type*	PIF Date	Reversal <input type="checkbox"/>

\*Use NSLDS Codes

SCHOOL OFFICIAL:	LENDER/SERVICER OFFICIAL:
SCHOOL NAME:	LENDER/SERVICER NAME:
DATE:	DATE:
PHONE:	PHONE: